

ANNUAL VISUAL VEHICLE SAFETY CHECKLIST

NFC ID# AG000 _____ LICENSE # _____ LOCATION _____

MAKE _____ MODEL _____ YEAR _____

X = OK

R = Repair Needed

INTERIOR		STEERING	
Brake, gas pedals and clutch operational		Sway or drifting	
Parking brake		Excessive Play	
Wipers/washers		Binding	
Mirrors (inside and out)			
Horn operational		EMERGENCY ITEMS	
Instrument panel and controls		First aid kit (up-to-date)	
Windshield/windows (appearance and operational)		Accident report kit	
Heater/defroster/AC/vents		Fire extinguisher (charged)	
Seat belts			
LIGHTS			
Head and parking lights		TIRES	
Tail and back-up lights		Visual inspection	
Turn signals		Inflated spare tire w/ jack	
Interior lights			
Hazard lights		MISCELLANEOUS	
		Paint (rust/peeling)	
BRAKING		Front and back license plates	
Noise/squealing		Decals	
Pulling			
Date of last oil change ____/____/____		CURRENT ODOMETER	

Remarks: _____

Assigned Driver _____ Date Completed _____

Signature of Person Conducting Inspection
